

## Goddard Procedures and Guidelines

DIRECTIVE NO. GPG 9980.1I  
EFFECTIVE DATE: July 9, 2004  
EXPIRATION DATE: July 9, 2009

APPROVED BY Signature: Original Signed by  
NAME: A. V. Diaz  
TITLE: Director

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**Responsible Office:** 306/Systems Management Support Office

**Title:** Internal Audit System

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### PREFACE

#### P.1 PURPOSE

This procedure establishes the internal audit process.

#### P.2 APPLICABILITY

This procedure applies to all GSFC organizations and functions within the scope of the Quality Management System (QMS) and the associated policies, procedures and guidelines, work instructions, and related records.

#### P.3 AUTHORITY

NPD 1280.1, NASA Management System Policy

#### P.4 REFERENCES

- a. GPG 1060.1, Management Responsibility
- b. GPG 1710.1, Corrective and Preventive Action
- c. GPG 5340.2, Control of Nonconforming Product
- d. NPR 1441.1, NASA Records Retention Schedules

#### P.5 CANCELLATION

GPG 9980.1H, Internal Audit System

#### P.6 SAFETY

None

## P.7 TRAINING

The Audit Coordinator maintains a listing of qualified auditors and lead auditors in the audit system from which internal audit teams are formed. Qualifications are based upon the following:

- Lead Auditor - The individual has successfully completed Lead Auditor training as evidenced by training certification or class attendance sheet, or has led an audit team on at least one previous audit of a quality system in his/her GSFC or non-GSFC career, or has been an auditor on at least two quality system audits (experience evidenced by audit report);
- Auditor - The individual has successfully completed auditor training as evidenced by training certification or class attendance sheet or has participated as an auditor in at least one audit of a quality system in his/her GSFC or non-GSFC career as evidenced by audit report. An individual may also be qualified by participating as an observer on a minimum of two internal audits, under the guidance of the Lead Auditor or Audit Team member.

A training module pertaining to this GPG is available at  
<http://ohr.gsfc.nasa.gov/DevGuide/ISO/home.htm>

## P.8 RECORDS

Record Title	Record Custodian	Retention
Qualified Auditors and Lead Auditors training/experience records	GSFC Audit Coordinator	<u>NRRS* 1/26.5A, Quality Management Files</u> (Destroy when 7 years old.)
Audit Executive Summaries contained in the Audit System	GSFC Audit Coordinator	<u>NRRS 1/26.5A, Quality Management Files</u>
Internal audit Nonconformance Reports (NCR's) and associated Corrective Actions in the NCR/CAS (NCR/Corrective Action System) database	Code 306 – NCR/CAS Administrators	<u>NRRS 1/26.5A, Quality Management Files</u>
Completed Configuration Change/Approval Requests (CCR Form <a href="#">GSFC 4-35</a> )	Audit Coordinator	<u>NRRS 8/9A&amp;B, Configuration Control Board (CCB) Records</u> (Records may be retired to a Federal Records Center when 2 years old. Destroy when 30 years old. Earlier destruction authorized upon receipt of specific approval from Program Manager)

\*NRRS – NASA Record Retention Schedules (NPR 1441.1)

## **P.9 METRICS**

Internal audit results form a portion of the inputs for Management Reviews in accordance with GPG 1060.1. The actual metrics tracked from one review to the next may vary according to management desires and perceived trends or issues. In general, typical metrics may consist of:

- a. Number of internal audits performed during the reporting period.
- b. Number of internal audit nonconformances documented during the reporting period or average number per audit performed.
- c. A breakdown of the types of nonconformances found as a result of internal audits and possible trends.
- d. Audit feedback from audit contacts.

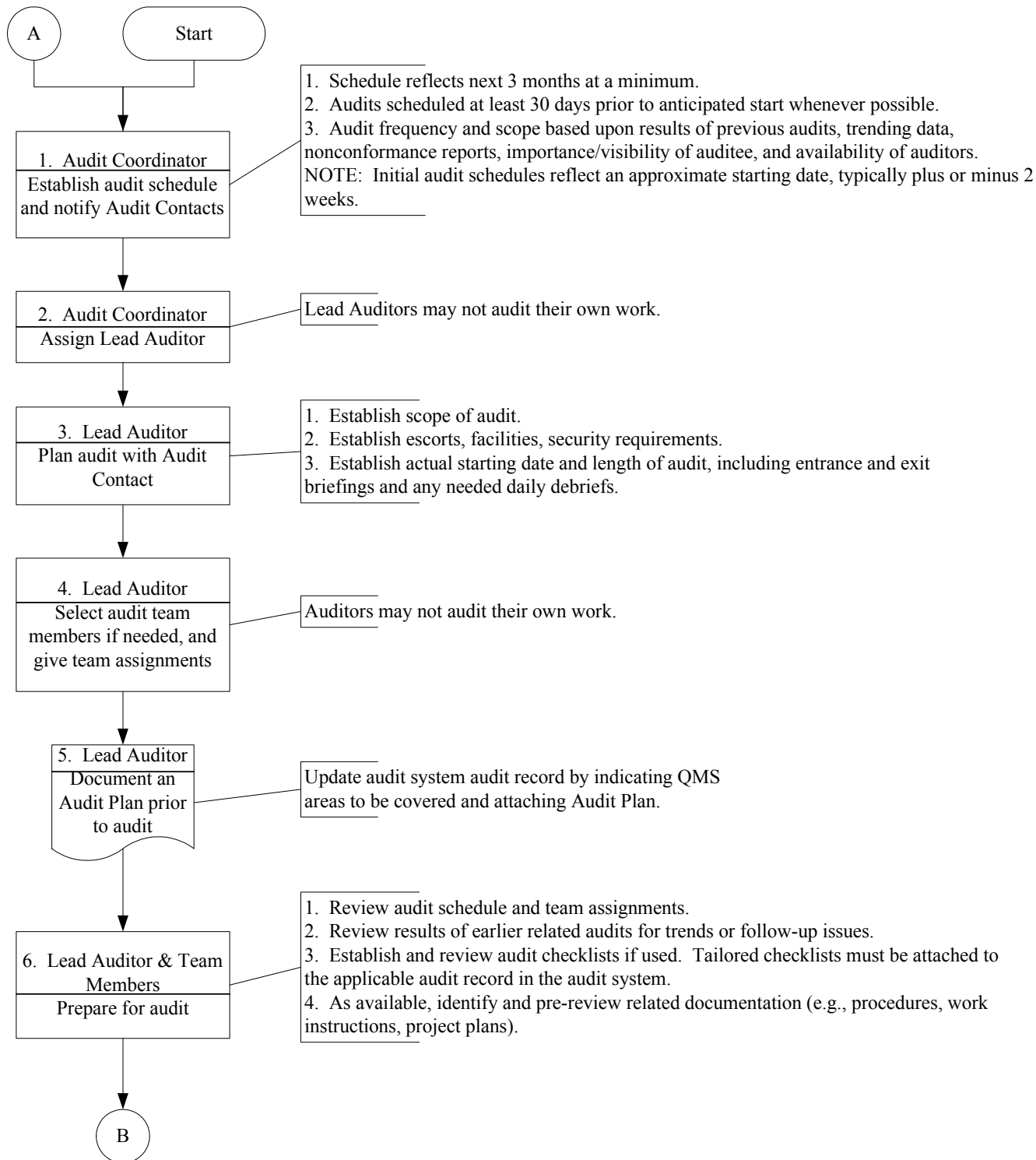
## **P.10 DEFINITIONS**

- a. Audit Contact – The representative of the audited organization/function who is the primary point of contact with the Lead Auditor.
- b. Audit Coordinator – A GSFC civil servant, appointed by the Quality Management System Representative, responsible for the management of the internal audit system. The identification of the Audit Coordinator is found on the Help pages within the on-line Audit System. He/she has disposition authority for all audit system configuration change requests.
- c. Audit Record – An electronic data file, within the audit system, of individual internal audits. Each audit record, when completed, contains at a minimum the audit history, participants, scope, results, and associated planning and summary documents. The status of each audit is identified in the audit record. Status categories are defined in the audit system Help pages.
- d. Audit System - An interactive on-line database used to document and track the schedule, participants, results, follow-up, and status of internal audits and supplier quality audits.
- e. Escort - The representative of the audited area who accompanies the auditor during the investigation and analysis of the objective evidence. This individual will (a) provide access to data records and physical areas, (b) offer interpretation of the audited organization's documents, (c) interface with other audited organization personnel, and (d) witness the discovery of nonconformances.
- f. NCR/CAS Database – An interactive on-line database, accessed via the GSFC QMS web site, used to document and track the status of identified nonconformance reports (NCR's) and associated corrective action (CA).

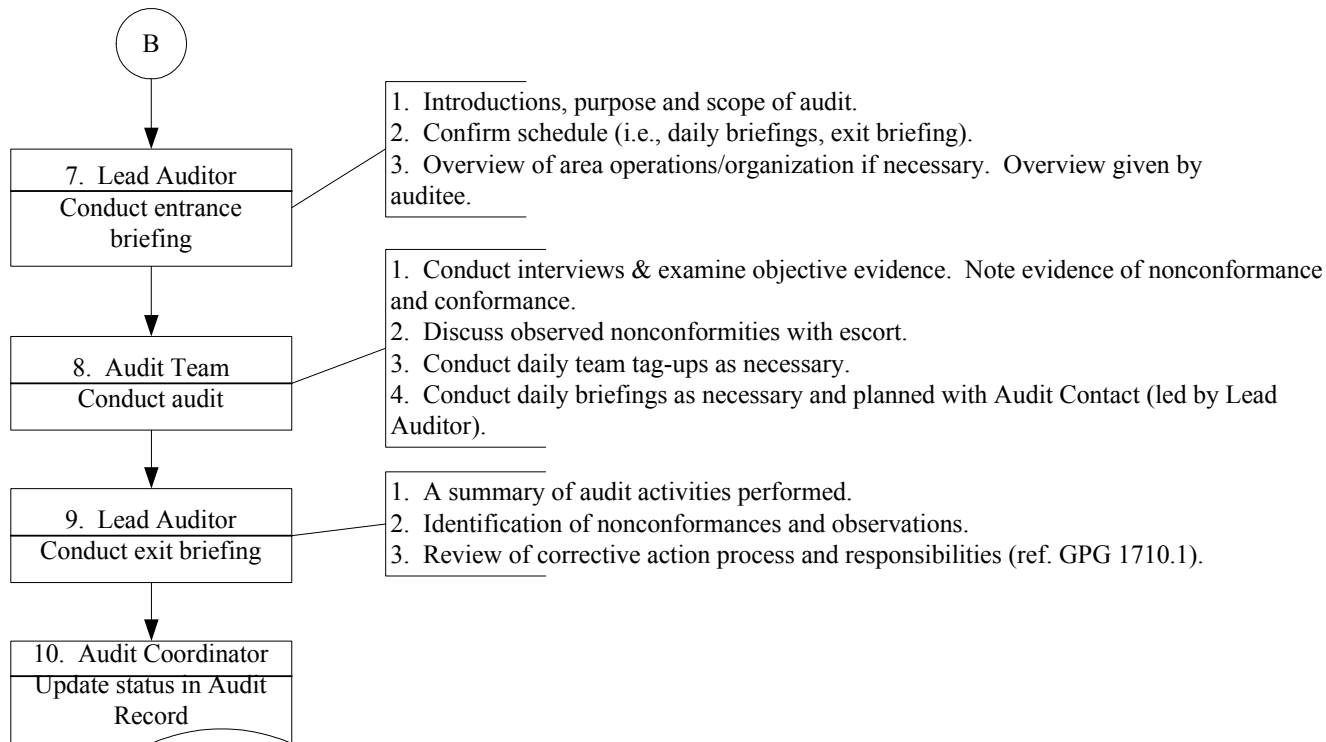
- g. Nonconformance – As applied to this GPG a nonconformance is an audit finding reflecting a failure to implement a documented requirement.
- h. Nonconformance Lead (NCL) – An individual identified within the NCR/CAS database who has the authority and responsibility to process organization NCR's.
- i. Objective Evidence - Quantitative or qualitative information, records, or statements of fact pertaining to the quality of an item or service or to the existence and implementation of a quality system element. It is based on observation, measurement, or test that can be verified.
- j. Observation – An audit finding which, considering its effect or potential effect, does not warrant the documentation of an NCR but should nevertheless be considered for correction. Observations are typically findings that can be corrected on the spot or with relatively minor documentation modifications. An observation may also be a finding acknowledging a particularly effective implementation of a requirement.
- k. Quality Management System Representative (QMSR) - A GSFC manager designated by and reporting directly to the Center Director, who has responsibility and authority for the effective implementation of the QMS.

## PROCEDURES

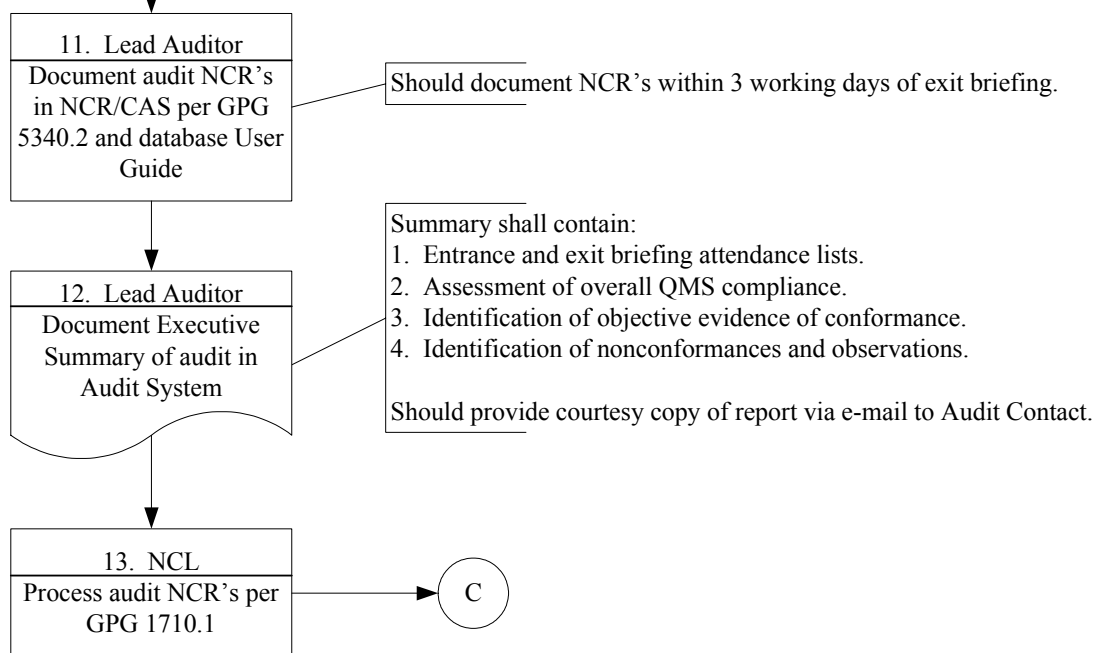
### Scheduling and Planning the Audit



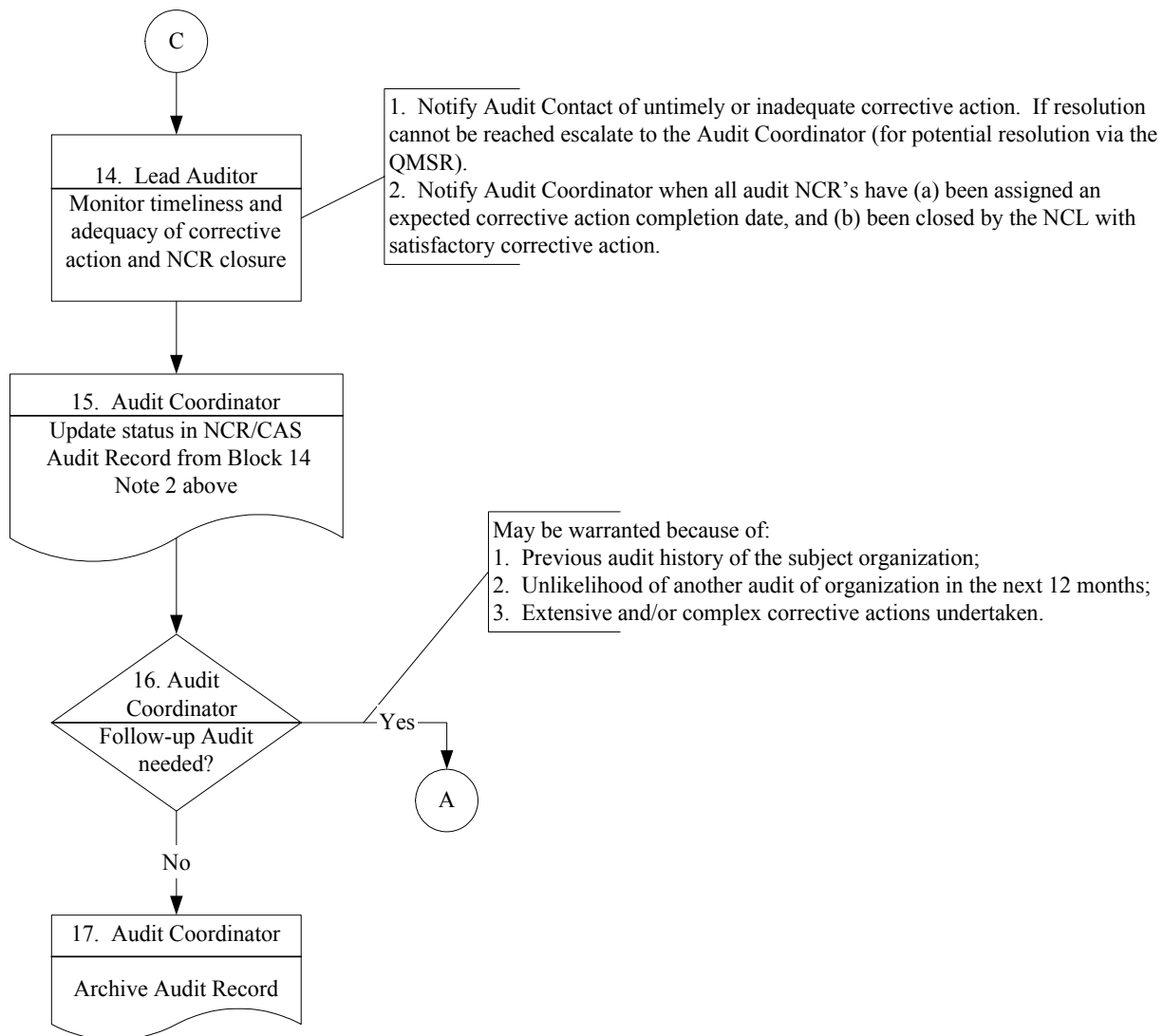
### Conducting the Audit



### Audit Reporting, Corrective Action and Close-Out



Audit Reporting, Corrective Action and Close-Out (cont.)



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### CHANGE HISTORY LOG

Revision	Effective Date	Description of Changes
Baseline	8/12/98	Initial Release
A	10/6/98	Header and footer format changes. 1(b) – Changed “process” to “requirement”. 1(e) – reworded element (b). 2.2 – Removed limitation of one audit per year per organization. 2.3.1/2.3.2 – Removed third criterion of “The individual is available”. 2.3.3.(f) – Added “approximately”. 2.4.1 – Changed “shall” to “should” in third sentence. 2.4.2 – Removed requirement for audit activities to be performed in the presence of the escort. 2.5.1(b) – Inserted “proposed” and removed second sentence “Limit conversation to clarifications and avoid lengthy discussions about the merits of the nonconformances or possible corrective actions”. 2.5.1(d) – Changed “the Exit Briefing date” to “NCR entry into the NCR/CA database”. 2.7.1 – Inserted “proposed” in first sentence. 3. – Identified quality records maintenance responsibilities.
B	2/19/99	Changed definition of "audit nonconformance". In 2.2 added "importance of the element to a product". 2.3.3c - added "exact". Reworded 2.3.3e.6. 2.4.3 last word of second sentence changed from "discussion" to "approval". 2.5.1 - deleted requirement to present documented NCR's at exit briefing. 2.6 - added second paragraph.



### CHANGE HISTORY LOG (continued)

C	5/7/99	<p>Expanded and moved records from section 3 to P6 to comply with GPG 1410.1 and added retention times.</p> <p>Revised 1(a), (d) and added (h).</p> <p>2.3 - Changed Audit Schedule from annual to three months (2<sup>nd</sup> sentence revision), added 3<sup>rd</sup> and 4<sup>th</sup> sentences. Reworded sentence 5.</p> <p>Reworded and re-ordered contents of 2.4.2. Added 2.4.2(c) and (d)</p> <p>2.7 - Added 2<sup>nd</sup> sentence</p> <p>2.8.1 – Reworded</p> <p>2.8.2 and 2.8.3 - Expanded to require Lead Auditor monitoring of corrective actions; notifying Audit Coordinator of entered expected corrective action completion dates. Added 2.8.3 Note.</p> <p>General revision of flowchart.</p>
D	8/16/99	<p>2.3, fourth sentence, revised to make 30 day advance warning a goal rather than an auditable requirement. Rewrite of first paragraph of 2.7 to allow entry of NCR's by Lead Auditor or Audit Coordinator. Three-day entry rule changed from "shall" to "should". Added parenthetical expression to first sentence of second paragraph of 2.7.</p>
E	11/09/99	<p>P6 - Refined necessary auditor qualification records and custodian</p> <p>2.2(a) and (b) - Added detail to required qualification records.</p> <p>2.3 modified to clarify audit scheduling and tailoring of same and added the Note.</p> <p>2.10 added.</p>
F	03/16/00	<p>P4 - Deleted reference to GPG 5100.2</p> <p>P6 - First record modified to reflect training/experience records rather than lists of auditors in auditor pool. Audit schedule deleted as a quality record. Third record retention period, deleted "whichever is sooner" at the end of the sentence.</p>

### CHANGE HISTORY LOG (continued)

G	08/28/00	<p>2.4.2e - Use of audit checklists is no longer mandatory.</p> <p>2.5.2 - Removed reference to audit checklists as recording medium.</p> <p>2.9 - Added audit record archiving process.</p>
H	05/02/02	<p>Complete reformat of Procedure section to both simplify and remove unwarranted self-imposed restrictions and requirements. New Preface sections added per latest GPG template. Added definitions for Audit Coordinator, Audit Record, Observation and NCL. Added new criteria for auditor qualification.</p>
I	07/09/04	<p>P.3 – Reference updated.</p> <p>P.4d added.</p> <p>P.7a – Qualification criteria changed from three to two audits in third line.</p> <p>P.8 – Custodian of NCR's updated. Changed acronym from NCR/CA to NCR/CAS throughout document for consistency with other directives.</p> <p>P.9d added.</p> <p>P.10g – Deleted second sentence referring to observations.</p> <p>P.10j – Definition was altered to better distinguish observation findings from nonconformance findings and delete the inference that correction of negative observations was mandatory.</p> <p>Procedures block 8, Note 1 – Added second sentence.</p> <p>Procedures block 12, Note 3 added.</p>